Form 990

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2010

Departm	nent of the Revenue	Treasury Service  The organization may have to use a copy of this return to satisfy sta	te reporting re-	auremer	nte	•	o Public ection	C						
_			and ending	-	3/30	·								
	ck if appl					dentificati		ber.						
	Address			23-7	-									
	Name ch		Room/suite	E Telep				—						
-	Initial reti		, communic	•		2-5194								
<b>-</b>	Terminat		<del></del>			, <u>J</u> ±J <u>±</u>		—						
<b>⊢</b> —	Amended		1.	G Gross	roccinin (		128	47						
		n pending F Name and address of principal officer KENT TUETKEN	H(a) Is this a				Yes	No						
	Аррисаці	28 BRIARWOOD DR HILLSBORO, IL 62049	H(b) Are all a	• .		-	Yes	- No						
1 70	x-exempt		1 ' '	attach a list		L								
	ebsite:		H(c) Group e											
	m of orga		ear of formation			f legal domicile	, IL							
Pai		Summary	<u></u>			, regar de lina		<u> </u>						
	1	Briefly describe the organization's mission or most significant activities												
	_		NDS ARE RAISED TO CONTRIBUTE TO LOCAL CHARITES											
ခ၁င			O SUPPORT THE CHARITABLE WORKS OF THE KNIGHTS											
ig.		OF COLUMBUS SUCH AS THE NEWMAN FUND.												
/e	2		his box If the organization discontinued its operations or disposed of more than 25% of its net assets											
9	3	·	of voting members of the governing body (Part VI, line 1a)											
Activities & Governance	4		of independent voting members of the governing body (Part VI, line 1b)											
itie	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5									
cţî.	6	Total number of volunteers (estimate if necessary)			6	· ·								
Ř	7a	Total unrelated business revenue from Part VIII, column (C), line 12			7a									
	ь	Net unrelated business taxable income from Form 990-T, line 34			7b									
				or Year		Curre	ent Year							
Φ	8	Contributions and grants (Part VIII, line 1h)		697	70		1284	7						
ลัน	9	Program service revenue (Part VIII, line 2g)												
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)												
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)											
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).	venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6970											
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)												
	14	Benefits paid to or for members (Part IX, column (A), line 4)												
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		22	22		23	30						
penses	16a	Professional fundraising fees (Part IX, column (A), line 11e)												
ě	Ь	Total fundraising expenses (Part IX, column (D), line 25) ▶												

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	Signature of of		<del></del>					Date Date	[1]	
	KENT Type or pont no	TUETKEN,	GRAND	KNIGHT						
Paid Preparer's Use Only	Pnnt/Type preparers KENNETH	s name WHITE		Preparer's	SELAL HO	Date 11/13/	11	Check if	PTIN P0042	120
	Firm's name	WHITE A	AND ASS	OCIATES	FINANCIAL	SVS	Firm's		55192	
	Firm's address  discuss this retu		ALIA ROAD 62 arer shown ab		ructions)	<u> </u>	Phone	e No 217 - 5		53 No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)

Total expenses Add lines 13-17 (must equal Part I)

Revenue less expenses Subtract line 18 from

Total assets (Part X, line 16) . .

Total liabilities (Part X, line 26) . . . .

Net assets or fund balances Subtract line 21

Form 990 (2010)

8444

8674

4173

3831

3831

End of Year

5786

6008

1818

1818

Beginning of Current Year

962

17

18

19

20

21

Net Assests or

und Balances

<u>-0</u>	rm 990 (2010) H	TITIODOKO KNIGH	TS OF COLUMBUS 4608	<u> </u>	Page 2
F	Part III Stat	ement of Program Ser	vice Accomplishments		
<del>,                                     </del>			ns a response to any question in this	Part III	[]
1		organization's mission	to a recipence to any question in time		• — —
•	-	<del>-</del>	ROVIDES A BUILDING FOR		
			PORTED BY THE KNIGHTS (		
	COLUMBUS.	MEMBERSHIP VO	LUNTEERS WORK ACTIVITIE	ES.	
2	Did the organization	undertake any significant pr	ogram services during the year which were no	ot listed on	
					X No
		ese new services on Schedu			11 110
3	_	<del>-</del>	significant changes in how it conducts any pro	<del></del>	(22)
				Yes	X No
	If "Yes," describe th	ese changes on Schedule O			
4	Describe the exemp	ot purpose achievements for	each of the organization's three largest progra	im services by expenses	
			nd section 4947(a)(1) trusts are required to rep		
		· · · · · <del>-</del>	enue, if any, for each program service reporte		
_		<del></del>			
48	a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		<b></b>			
		<b></b>			
		<b></b>			
_			maludina acombo of C	\ /Davianua ®	
41	b (Code		including grants of \$	) (Revenue \$	)
41	b (Code	) (Expenses \$	including grants of \$		
41	b (Code	) (Expenses \$_			
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40	b (Code	) (Expenses \$) (Expenses \$)	including grants of \$		
40	b (Code	) (Expenses \$_	including grants of \$		

	n 990 (2010) art IV Checklist of Required Schedules			age :
	- Chooking of Hodailog Collegator		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	-		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C,Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			7.5
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			٠,
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	. [		37
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			v
	Schedule D, Part VI	11a		X
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
C		11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	, , , , , , , , , , , , , , , , , , , ,	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			١
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			٠,
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			v
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	45		Х
	or entity located outside the United States? If "Yes," complete Schedule F, Part II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III and IV	46		Х
4 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,	<del>'''</del> -		
18	lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	- <del>-</del> -		1
1 3	If "Yes," complete Schedule G, Part III	19		X
202	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	<u> </u>		<u> </u>
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		X
ON			n 990	

P	Checklist of Required Schedules (continued)			
0.4	Did the constant of the consta		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	24		v
22	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5 about compensation of the organization's			
23	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000	23		
244	as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through			
	24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		- 21
Ŭ	to defease any tax-exempt bonds?	24c		Х
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		- 21
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	100		
_	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	]	l	1
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			- 21
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		<u> </u>	
	substantial contributor, or a grant selection committee member, to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
b	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,	i	ļ	İ
	Part V, line 2	ļ		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activites through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete			
	Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note All Form 990 filers are required to complete Schedule O	38	<u></u>	X

Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	• • •		Щ.
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	- 1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			i
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	İ		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		
b	If "Yes," enter the name of the foreign country ▶			
-	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
-	solicit any contributions that were not tax deductible?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			l
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?.	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ĺ
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			ĺ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_,		İ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <b>e</b>		<del> </del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del></del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		·
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			
	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization,			İ
_	have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		l
a	Did the organization make any taxable distributions under section 4966?	9b		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			1
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b 44				
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
a	Gross income from other sources (Do not net amounts due or paid to other sources against			
b	amounts due or received from them )			
40-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
b 12				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O	a		-
L	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand			
C 140	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<del> </del>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			1
DNA	in 169, has it lieu a i onn 120 to report these payments. In 110, provide an explanation in concedit o 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		990 (20	)10)

Form 990 (2010) HILLSBORO KNIGHTS OF COLUMBUS 4608 23-7541805 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI........... Section A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year . . . . . . . . 189 1a Enter the number of voting members included in line 1a, above, who are independent . . . . . b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . . . . . Χ Does the organization have members, stockholders, or other persons who may elect one or more members 7a 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . . . . . . Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Χ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O......... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No

10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		'	
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			ŀ
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			l

Sec	ction C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed ▶ IL											
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)											
	available for public inspection. Indicate how you make these available. Check all that apply											
	Own website Another's website Upon request											
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest											

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ► KENNETH WHITE 2175322653

policy, and financial statements available to the public

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement

If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard

X

Χ

15b

	•				
orm 990 (2010)	HILLSBORO	KNIGHTS	OF	COLUMBUS	4

4608 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII **Employees, and Independent Contractors** 

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

Check if Schedule O contains a response to any question in this Part VII . .

- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organ	ization noi	any r	elate	ed o	rgar	ıızatıo	ns c	ompensated any current	officer, director, or truste	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	(S) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) KENT TUETKEN GRAND KNIGHT	2	х						0	0	0
(2) KIRN WILDHABER DEPUTY GRAND KNIGHT	2	X						0	0	0
(3) JOHN EICKHOFF SECRETARY	2	Х						0	0	0
(4) ED HUBER TREASURER	2	Х						0	0	0
(5) CHARLIE PETERS CHANCELLOR	1	Х						0	0	0
(6) DENNIS BACON WARDEN	1	Х						0	0	0
(7) FRANK JORN TRUSTEE	1	X						0	0	0
(8) BOB ADAMS TRUSTEE	1	Х						0	0	0
(9) KENNETH WHITE TRUSTEE	1	Х						0	0	0
(10)										
(11)										
(12)				į						
(13)	-									
(14)										
(15)										
(16)										

Part VII	Section A. Officers	Directors	Trus	tees	, Ke	y E	mploy	ees	, and Highest Compens	ated Employees (contin	ued)		
(A) Name and Title		(B) Average hours per		_	che (che	~	ll that a	pply)	(D) Reportable compensation	(E)  Reportable  compensation		(F) stimated mount o	
		week (describe hours for related organization in Schedule	dividual trustee director	Institutional trustee	Officer	Key employee	Highest compensated employee	omer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	con f org ar	other  npensati from the ganizati nd relati ganizati	tion e on ed
(17)		O)	-	-	-	-	-						
		-	ļ		_	1		ļ					_
(18)		-		<u> </u>									
(19)		-											
(20)		-											
(21)		-											
(22)		-											<del>-</del>
(23)		-											ŧ
(24)		-			-								
(25)		-			_								
(26)		-				<del> </del>							
(27)		-											
(28)		-											
	1							<b>&gt;</b>					
	m continuation sheets to	-						<b>&gt;</b>				_	
	nber of individuals (includi								who received more than	\$100,000 in reportable of	compensa	tion fro	om the
organizat	tion ▶											\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
3 Did the or	rganization list any forme	r officer, dır	ector o	or tri	uste	e, ke	ey emp	oloye	ee, or highest compensa	ted		Yes	No
	e on line 1a? If "Yes," com	•									3		X
	ndividual listed on line 1a, nization and related organ												
_	1	_									4		X
	person listed on line 1a red			-									v
	es rendered to the organi dependent Contractors	zation	es, c	omp	oiete	Scr	ieauie	J 10	r such person	· · · · · · · · · · · · · · · · · · ·	5	l	<u>X</u> _
	this table for your five high	hest comp	ensate	ed ır	ndep	end	ent co	ntra	ctors that received more	than \$100,000 of			
compens	ation from the organizatio	n				_			···				
		A) usiness addr	ess						Des	(B) cription of services		(C) pensat	on
		-											
		-				•							
	· — · · · · · · · · · · · · · · · · · ·												
				<u> </u>			٠٠ - ١٠ اس		hatad ab	und many			
	nber of independent contr 0,000 incompensation fro					ımıte	a to th	ıose	listed above) who receive	rea more			
QNA	o,ooo moompenaanon noi	uie oigai									Form	990 (2	010)

Form 990 (2010) Page 9 Part VIII Statement of Revenue (C) (A) (B) Related or Revenue excluded from tax under sections 512, 513, or 514 Total revenue Unrelated exempt function business revenue 1a Federated campaigns . . . . . 1a b Membership dues . . . . . . . 1b 2190 Contributions, gifts, grants and other similar amounts c Fundraising events . . . . . . 1c 3463 d Related organizations . . . . . 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above . . . . . . . 1f g Noncash contributions included in lines 1a-1f \$ h Total Add lines 1a-1f . . . . . . . . . . . . . . . 12847 Revenue f All other program service revenue . . . . 3 Investment income (including dividends, interest, and other similar amounts) . . . . . . . . . . . . . . . . Income from investment of tax-exempt bond proceeds (i) Real 6a Gross Rents . . . . . b Less rental expenses . . c Rental income or (loss) . d Net rental income cr (loss) . . . . . . . . . 7a Gross amount from sales (i) Secunties of assets other than inventory . . . . . . . b Less cost or other basis and sales expenses . . . c Gain or (loss) . . . . . 8a Gross income from fundraising events (not including \$ 3463 of contributions reported on line 1c) See Part IV, line 18 . . . . . . . . . . a b Less direct expenses . . . . . . . b c Net income or (loss) from fundraising events . . . . . 9a Gross income from gaming activities See Part IV, line 19 . . . . . . . . . a b Less direct expenses . . . . . . b c Net income or (loss) from gaming activities . . . . . . 10a Gross sales of inventory, less returns and allowances . . . . . . . . a b Less cost of goods sold . . . . . . b c Net income or (loss) from sales of inventory . . . . **Business Code** Miscellaneous Revenue 11a d All other revenue . . . . . . . . . . . . . 12847 12 Total Revenue. See instructions

Part IX	Statement of Functional Expenses	

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Ω,	o not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	•	Total expenses	Program Service	Management and	Fundraising
_	o, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				•••••
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	230		230	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
	Payroll taxes				
	Fees for services (non-employees)				
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other				
	Advertising and promotion	3.65		165	<del> </del>
	Office expenses	154		154	
	Information technology	131		131	
	Royalties				
	Occupancy				
	Payments of travel or entertainment expenses				
10					
40	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	insurance				
24	Other expenses Itemize expenses not				
	covered above (List misc expenses in line 24f				
	If line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)	1923		1923	· · · · · · · · · · · · · · · · · · ·
	PER CAPITA TAXES		2174	1923	<u> </u>
	DONATIONS	3174	3174	138	
	SUPPLIES	138	. <del>.</del>		
C	MISC	2890		2890	<del></del>
E	) 				
	All other expenses		2154	5500	
	Total functional expenses. Add lines 1 through 24f	8674	3174	5500	
26	Joint Costs. Check here ▶ If following SOP 98-2				
	(ASC 958-720) Complete this line only if the organiza-				
	tion reported in column (B) joint costs from a combined				
_	educational campaign and fundraising solicitation	<u> </u>			Form 990 (2010)
ON	A				, Olice 230 (2010)

Form 990 (2010)

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1818	1	3831
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	_
	4	Accounts receivable, net		4	<del>.</del>
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)),			
		persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ä	9	Prepaid expenses and deferred charges		9	-
	I -	Land, buildings, and equipment cost or other basis			·····
	IVa	Complete Part VI of Schedule D 10a			
	۱.	Less accumulated depreciation 10b		10c	•
		Investments—publicly traded securities	·	11	
	1	' '		12	
		Investments—other securities See Part IV, line 11		13	
		Investments—program-related See Part IV, line 11		14	
		Intangible assets		15	
		Other assets See Part IV, line 11	1818	16	3831
		Total assets. Add lines 1 through 15 (must equal line 34)	1010	17	3031
	1	Accounts payable and accrued expenses		18	
	ı	Grants payable		<del>  '-</del>	
		Deferred revenue		19	
		Tax-exempt bond liabilities		20	
	1	Escrow or custodial account liability Complete Part IV of Schedule D		21	<del></del>
Liabilities	22	Payables to current and former officers, directors, trustees, key			
lab		employees, highest compensated employees, and disqualified			
ر		persons Complete Part II of Schedule L		22	
		Secured mortgages and notes payable to unrelated third parties		23	
		Unsecured notes and loans payable to unrelated third parties		24	
		Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117, check here ▶  and			
		complete lines 27 through 29, and lines 33 and 34.			
or Fund Balances		Unrestricted net assets		27	
	1	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	· <del>-</del> · · · · · · · · · · · · · · · · · · ·	29	
Ë	İ	Organizations that do not follow SFAS 117, check here ▶ [X]			
5		and complete lines 30 through 34.			
sets		Capital stock or trust principal, or current funds		30	
Net Assets		Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	1818	32	3831
	33	Total net assets or fund balances	1818	33	3831
	34	Total liabilities and net assets/fund balances	1818	34	3831

Form 990 (2010)				Pag	je 12
Part XI Reconcililation of Net Assts					
Check if Schedule O contains a response to any question in this Part XI				<u></u>	$oxedsymbol{oxed}$
1 Total revenue (must equal Part VIII, column (A), line 12)		1 1 12847			47
Total expenses (must equal Part IX, column (A), line 25)		J	8674		
Revenue less expenses Subtract line 2 from line 1				41	.73
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				18	318
Other changes in net assets or fund balances (explain in Schedule O)				-21	.60
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,					
column (B))	. 6			3 8	331
Part XII Financial Statements and Reporting					
Check if Schedule O contains a response to any question in this Part XII					
				Yes	No
1 Accounting method used to prepare the Form 990 Cash Accrual Other					
If the organization changed its method of accounting from a prior year or checked "Other," explain in					
Schedule O					
Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		
b Were the organization's financial statements audited by an independent accountant?		[	2b		
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	ihe				
audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
If the organization changed either its oversight process or selection process during the tax year, explain in					1
Schedule O			,		i
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			.		ı
issued on a consolidated basis, separate basis, or both			.		ı
Separate basis Consolidated basis Both consolidated and separate basis			. !		i
As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		j	.		ı
the Single Audit Act and OMB Circular A-133?			3a		ı
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		ſ			
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u> .	<u></u>	3b		
QîvA			Fo	rm 990	(201